

Fill in this information to identify your case and this filing:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern</u>	District of	<u>Texas</u>
Case number	<u>24-31642-13</u>		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1 102 Hillside Drive West,
Burleson TX 76028
Street address, if available, or other description
102 Hillside Drive West
Burleson, TX 76028
City State ZIP Code
Johnson
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☒ Other Homestead

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Homestead consisting of house, lot, and mineral interests located at: 102 Hillside Drive West, Burleson TX 76028

Source of Value: Johnson County CAD

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$476,758.00

Current value of the portion you own?
\$476,758.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

Debtor **Brandi Michelle Price**

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1.2 **Hilton Grand Vacations
Timeshare**

Street address, if available, or other
description

3575 Las Vegas Blvd S

Las Vegas, NV 89109

City State ZIP Code

Clark

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☒ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local
property identification number:** _____

Source of Value: Debtor's best estimate

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:
Creditors Who Have Claims Secured by Property*.

**Current value of the
entire property?**

\$10,000.00

**Current value of the
portion you own?**

\$10,000.00

**Describe the nature of your ownership interest
(such as fee simple, tenancy by the entireties, or
a life estate), if known.**

Timeshare

☐ **Check if this is community property**
(see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages
you have attached for Part 1. Write that number here**



\$486,758.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles
you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
☒ Yes

3.1 **Make:** **Chrysler**

Model: **300**

Year: **2013**

Approximate mileage: **90,000**

Other information:

**Debtor's primary means of
transportation.
VIN: xx3706**

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see
instructions)

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:
Creditors Who Have Claims Secured by Property*.

**Current value of the
entire property?**

\$4,250.00

**Current value of the
portion you own?**

\$4,250.00

If you own or have more than one, describe here:

Debtor **Brandi Michelle Price**

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3.2 Make: **Chevrolet** Who has an interest in the property? Check one.
 Model: **Camaro** ☒ Debtor 1 only
 Year: **2016** ☐ Debtor 2 only
 Approximate mileage: _____ ☐ Debtor 1 and Debtor 2 only
 Other information: _____ ☐ At least one of the debtors and another
☒ Check if this is community property (see instructions)

VIN: 1G1FH1R70G0155384

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$11,275.00** Current value of the portion you own? **\$11,275.00**

3.3 Make: **Ford** Who has an interest in the property? Check one.
 Model: **F150** ☒ Debtor 1 only
 Year: **2016** ☐ Debtor 2 only
 Approximate mileage: **125000** ☐ Debtor 1 and Debtor 2 only
 Other information: _____ ☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

VIN: xx5371

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$14,275.00** Current value of the portion you own? **\$14,275.00**

3.4 Make: **BMW** Who has an interest in the property? Check one.
 Model: **328XI** ☒ Debtor 1 only
 Year: **2008** ☐ Debtor 2 only
 Approximate mileage: **140000** ☐ Debtor 1 and Debtor 2 only
 Other information: _____ ☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

VIN: xx8418

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **\$2,725.00** Current value of the portion you own? **\$2,725.00**

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No
☐ Yes

4.1 Make: _____ Who has an interest in the property? Check one.
 Model: _____ ☐ Debtor 1 only
 Year: _____ ☐ Debtor 2 only
 Other information: _____ ☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? _____ Current value of the portion you own? _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$32,525.00

Part 3: Describe Your Personal and Household Items

Debtor **Brandi Michelle Price**

Case number (if known) **24-31642-13**

Do you own or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings <i>Examples:</i> Major appliances, furniture, linens, china, kitchenware <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe. <div>See Attached.</div>	<u>\$2,325.00</u>
7.	Electronics <i>Examples:</i> Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe. <div>Cellular Telephone Television - 3</div>	<u>\$700.00</u>
8.	Collectibles of value <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe. <div>Family Pictures</div>	<u>\$5.00</u>
9.	Equipment for sports and hobbies <i>Examples:</i> Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe. <div></div>	<u></u>
10.	Firearms <i>Examples:</i> Pistols, rifles, shotguns, ammunition, and related equipment <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe. <div></div>	<u></u>
11.	Clothes <i>Examples:</i> Everyday clothes, furs, leather coats, designer wear, shoes, accessories <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe. <div>Clothing (1 Adult)</div>	<u>\$600.00</u>
12.	Jewelry <i>Examples:</i> Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Describe. <div>Watches, Earrings, Necklaces, Costume Jewelry</div>	<u>\$300.00</u>

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13. **Non-farm animals**

Examples: Dogs, cats, birds, horses

☐ No

☒ Yes. Describe:

Household Pets - 1 Dog

\$10.00

14. **Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information:

15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**



\$3,940.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes Cash:

\$0.00

17. **Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes

Institution name:

17.1. Checking account:	CashApp issued by Sutton Bank Account Number: 2581	\$0.00
17.2. Checking account:	Wells Fargo Bank Business	\$0.00
17.3. Checking account:	Wells Fargo Bank Platinum	\$0.00
17.4. Savings account:	Wells Fargo Account Number: 0661	(\$488.00)

18. **Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes Institution or issuer name:

_____	_____
_____	_____
_____	_____

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19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them.....

Issuer name:

_____	_____
_____	_____
_____	_____

21. **Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes

Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them. ...

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26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. ...

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them. ...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal:

State:

Local:

29. **Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

30. **Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.

Debtor **Brandi Michelle Price**

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31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value. ... Company name: Beneficiary: Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information.

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33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.

--

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.

--

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information.

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36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here



(\$488.00)

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

☒ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor **Brandi Michelle Price**

Case number (if known) **24-31642-13**

38. **Accounts receivable or commissions you already earned**

☒ No

☐ Yes. Describe.

39. **Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

☒ Yes. Describe.

Computer, Desk, Cell Phone

\$300.00

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

☒ No

☐ Yes. Describe.

41. **Inventory**

☒ No

☐ Yes. Describe.

42. **Interests in partnerships or joint ventures**

☒ No

☐ Yes. Describe

Name of entity:

% of ownership:

43. **Customer lists, mailing lists, or other compilations**

☒ No

☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe.

Debtor **Brandi Michelle Price**

Case number (if known) **24-31642-13**

44. **Any business-related property you did not already list**

- ☒ No
☐ Yes. Give specific information

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here**



\$300.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes

--

48. **Crops—either growing or harvested**

- ☒ No
☐ Yes. Give specific information.

--

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No
☐ Yes

--

50. **Farm and fishing supplies, chemicals, and feed**

- ☒ No
☐ Yes

--

Debtor **Brandi Michelle Price**

Case number (if known) **24-31642-13**

51. **Any farm- and commercial fishing-related property you did not already list**

☒ No

☐ Yes. Give specific information.

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here**



\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.

54. **Add the dollar value of all of your entries from Part 7. Write that number here**



\$0.00

Part 8: List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2**



\$486,758.00

56. **Part 2: Total vehicles, line 5**

\$32,525.00

57. **Part 3: Total personal and household items, line 15**

\$3,940.00

58. **Part 4: Total financial assets, line 36**

(\$488.00)

59. **Part 5: Total business-related property, line 45**

\$300.00

60. **Part 6: Total farm- and fishing-related property, line 52**

\$0.00

61. **Part 7: Total other property not listed, line 54**

+

\$0.00

62. **Total personal property.** Add lines 56 through 61.

\$36,277.00

Copy personal property total ➔

+ \$36,277.00

63. **Total of all property on Schedule A/B.** Add line 55 + line 62.

\$523,035.00

Debtor **Brandi Michelle Price**

Case number (if known) **24-31642-13**

Continuation Page

6.	Household goods and furnishings	
	Bed - 2	\$400.00
	Clothes Dryer	\$100.00
	Coffee Table	\$25.00
	Dish Washer	\$250.00
	Dishes / Flatware	\$50.00
	Dressers / Nightstands	\$200.00
	Lamps / Accessories	\$50.00
	Microwave	\$50.00
	Pots / Pans / Cookware	\$100.00
	Refrigerator / Freezer	\$500.00
	Sofa	\$250.00
	Stove / Range	\$250.00
	Washing Machine	\$100.00

Fill in this information to identify your case:

Debtor 1	Brandi	Michelle	Price
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern		District of Texas
Case number (if known)	24-31642-13		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
Brief description: 102 Hillside Drive West, Burleson TX 76028 102 Hillside Drive West Burleson, TX 76028	\$476,758.00	<input checked="" type="checkbox"/> \$131,929.31	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Line from <i>Schedule A/B</i> : 1.1		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. **Are you claiming a homestead exemption of more than \$189,050?**

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1

Brandi**Michelle****Price**Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: 2013 Chrysler 300 VIN: xx3706 Debtor's primary means of transportation.	\$4,250.00	<input checked="" type="checkbox"/> \$4,250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)
Line from <i>Schedule A/B</i> : 3.3			
Brief description: Sofa	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Coffee Table	\$25.00	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Refrigerator / Freezer	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Stove / Range	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Microwave	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Dish Washer	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Washing Machine	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			
Brief description: Clothes Dryer	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from <i>Schedule A/B</i> : 6			

Debtor 1

Brandi**Michelle****Price**Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Dishes / Flatware</u> Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Pots / Pans / Cookware</u> Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Bed - 2</u> Line from Schedule A/B: <u>6</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Dressers / Nightstands</u> Line from Schedule A/B: <u>6</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Lamps / Accessories</u> Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Television - 3</u> Line from Schedule A/B: <u>7</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Cellular Telephone</u> Line from Schedule A/B: <u>7</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Family Pictures</u> Line from Schedule A/B: <u>8</u>	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Clothing (1 Adult)</u> Line from Schedule A/B: <u>11</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</u>
Brief description: <u>Watches, Earrings, Necklaces, Costume Jewelry</u> Line from Schedule A/B: <u>12</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)</u>

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: Household Pets - 1 Dog	\$10.00	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)
Line from <i>Schedule A/B</i> : 13			
Brief description: Computer, Desk, Cell Phone	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)
Line from <i>Schedule A/B</i> : 39			

Fill in this information to identify your case:

Debtor 1 Brandi Michelle Price
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Texas

Case number (if 24-31642-13
known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.1	Burleson ISD Appraisal	Describe the property that secures the claim:	<u>\$5,995.23</u>	<u>\$476,758.00</u>	<u>\$0.00</u>
-----	-------------------------------	---	-------------------	---------------------	---------------

Creditor's Name

c/o Perdue, Brandon, Fielder, et al

PO Box 13430

Number Street

Arlington, TX 76094

City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Date debt was incurred 2024 Last 4 digits of account number _____

102 Hillside Drive West, Burleson TX 76028
102 Hillside Drive West Burleson, TX 76028

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☒ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset) Property Taxes

Add the dollar value of your entries in Column A on this page. Write that number here:

\$5,995.23

Debtor 1

Brandi **Michelle** **Price**
First Name Middle Name Last Name

Case number (if known) **24-31642-13**

Part 1:		Column A	Column B	Column C	
Additional Page		Amount of claim	Value of collateral that supports this claim	Unsecured portion	
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Do not deduct the value of collateral.		If any	
2.2	Fay Servicing Llc Creditor's Name Attn: Bankruptcy Dept PO Box 809441 Number Street Chicago, IL 60680 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 6/1/2021 Last 4 digits of account number 9 3 4 4	Describe the property that secures the claim: 102 Hillside Drive West, Burleson TX 76028 102 Hillside Drive West Burleson, TX 76028 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Deed of Trust	\$336,739.53	\$476,758.00	\$0.00
2.3	Hilton Resorts Corp Creditor's Name Hilton Grand Vacations Club Flamingo 6355 Metrowest Blvd Suite 180 Number Street Orlando, FL 32835 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 2/1/2021 Last 4 digits of account number 0 0 3 4	Describe the property that secures the claim: Hilton Grand Vacations Timeshare 3575 Las Vegas Blvd S Las Vegas, NV 89109 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Timeshare	\$6,986.78	\$10,000.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$343,726.31			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

		Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1: Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				
2.4 Integrity Texas Funding, LP <hr/> Creditor's Name 3440 Preston Ridge Rd Ste 500 <hr/> Number Street Alpharetta, GA 30005 <hr/> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 06/16/2021	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> 2008 BMW 328XI </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Title Loan</u> Last 4 digits of account number <u>0</u> <u>9</u> <u>6</u> <u>9</u>	\$2,616.74	\$2,725.00	\$0.00
2.5 Johnson County Appraisal <hr/> Creditor's Name Perdue, Brandon, Fielder, Collins, & Mott <hr/> P.O. Box 13430 <hr/> Number Street Arlington, TX 76094 <hr/> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 2024	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> 102 Hillside Drive West, Burleson TX 76028 102 Hillside Drive West Burleson, TX 76028 </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Property Taxes</u> Last 4 digits of account number _____	\$1,597.14	\$476,758.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> \$4,213.88 </div>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

Debtor 1 **Brandi Michelle Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

Part 1:		Column A	Column B	Column C
Additional Page		Amount of claim	Value of collateral that supports this claim	Unsecured portion
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Do not deduct the value of collateral.		If any
2.6	Johnson County ESD #1 App Creditor's Name Perdue, Brandon, Fielder, Collins, & Mott P.O. Box 13430 Number Street Arlington, TX 76094 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 2024 Describe the property that secures the claim: 102 Hillside Drive West, Burleson TX 76028 102 Hillside Drive West Burleson, TX 76028 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Property Taxes</u> Last 4 digits of account number _____	\$258.41	\$476,758.00	\$0.00
2.7	Johnson County Lateral Road Appraisal Creditor's Name c/o Perdue, Brandon, Fielder, et al P.O. Box 13430 Number Street Arlington, TX 76094 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 2024 Describe the property that secures the claim: 102 Hillside Drive West, Burleson TX 76028 102 Hillside Drive West Burleson, TX 76028 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Property Taxes</u> Last 4 digits of account number _____	\$238.38	\$476,758.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$496.79		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:				

Debtor 1

Brandi **Michelle** **Price**
First Name Middle Name Last Name

Case number (if known) **24-31642-13**

		Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>	
Part 1: 2.8	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. RBFCU Creditor's Name Po Box 2097 Number Street Universal City, TX 78148 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>1/1/2021</u> Last 4 digits of account number <u>0 5 9 4</u>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">2016 Chevrolet Camaro</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Certificate of Title</u>	\$10,009.00	\$11,275.00	\$0.00
2.9	Texas Car Title and Payday Loan Services Creditor's Name 5400 E Lancaster Number Street Fort Worth, TX 76112 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>10/1/2023</u> Last 4 digits of account number _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">2016 Ford F150</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) <u>Note Loan</u>	\$10,030.08	\$14,275.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 2px;">\$20,039.08</div>			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 2px;">\$374,471.29</div>			

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1. **Mackie Wolf & Zientz, P.C.**

Name

14160 North Dallas Parkway

Number Street

Dallas, TX 75254

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? **2.2**

Last 4 digits of account number **3 4 7 3**

Fill in this information to identify your case:

Debtor 1	Brandi	Michelle	Price
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern		District of Texas
Case number (if known)	24-31642-13		

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 Allmand Law Firm, PLLC Priority Creditor's Name 860 Airport Fwy Ste 401 Number Street Hurst, TX 76054-3264 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? 02/23/2024 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify Attorney Fees	\$3,250.00	\$3,250.00
			\$0.00

Debtor 1 **Brandi** **Michelle** **Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.2	Internal Revenue Service	Last 4 digits of account number		\$45,000.00	\$45,000.00	\$0.00
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Priority Creditor's Name

When was the debt incurred? **12/31/2021**

Centralized Insolvency Operations

PO Box 7346

Number Street

Philadelphia, PA 19101-7346

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 **Brandi** **Michelle** **Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	American Eagle Nonpriority Creditor's Name P.O. Box 105981 Dept. 71 Number Street Atlanta, GA 30353-5981 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$600.00
4.2	Bank of America Nonpriority Creditor's Name Bankruptcy PO Box 660710 Number Street Dallas, TX 75266 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 5 0 3</u> When was the debt incurred? <u>1/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$1,750.00

Debtor 1 **Brandi** **Michelle** **Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.3	Capital One Nonpriority Creditor's Name By American InfoSource as agent PO Box 71083 Number Street Charlotte, NC 28272 City State ZIP Code	Last 4 digits of account number 8 4 1 2 When was the debt incurred? 7/1/2021 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify CreditCard	\$2,941.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.4	Comenity Bank/Buckle Nonpriority Creditor's Name PO Box 182125 Number Street Columbus , OH 73218 City State ZIP Code	Last 4 digits of account number 3 0 0 3 When was the debt incurred? 12/1/2021 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify ChargeAccount	\$561.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.5	Credit One Bank	Last 4 digits of account number	<u>1 2 0 0</u>	\$632.00
Nonpriority Creditor's Name		When was the debt incurred? <u>7/1/2020</u>		
Attn: Bankruptcy Department				
PO Box BOX 60500		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
City of Industry, CA 91716		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.6	Credit Systems International, Inc	Last 4 digits of account number	<u>5 7 4 8</u>	\$500.00
Nonpriority Creditor's Name		When was the debt incurred? <u>6/1/2022</u>		
Attn: Bankruptcy				
PO Box 1088		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Arlington, TX 76004		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
		Type of NONPRIORITY unsecured claim:		
		<input type="checkbox"/> Student loans		
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input checked="" type="checkbox"/> Other. Specify <u>Collecting for PROPATH SERVICES LLC</u>		

Debtor 1 **Brandi** **Michelle** **Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7	Fst Premier <hr/> Nonpriority Creditor's Name 601 S Minneapolis Ave <hr/> Number Street <hr/> Sioux Falls, SD 57104 <hr/> City State ZIP Code	Last 4 digits of account number <u>8 5 5 1</u> <hr/> When was the debt incurred? <u>2/1/2022</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$570.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.8	Goldman Sachs Bank USA <hr/> Nonpriority Creditor's Name Attn: Bankruptcy <hr/> PO Box 7247 <hr/> Number Street <hr/> Philadelphia, PA 19170 <hr/> City State ZIP Code	Last 4 digits of account number <u>5 6 1 7</u> <hr/> When was the debt incurred? <u>1/1/2022</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$8,860.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.9	Huntington National Management LLC Nonpriority Creditor's Name PO Box 1158 Number Street Hamburg, NY 14075 City State ZIP Code	Last 4 digits of account number <u>2</u> <u>5</u> <u>7</u> <u>7</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -FastCash.com</u>	\$915.71
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.10	Huntington National Management LLC Nonpriority Creditor's Name PO Box 1158 Number Street Hamburg, NY 14075 City State ZIP Code	Last 4 digits of account number <u>9</u> <u>4</u> <u>1</u> <u>0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -EZCorp EZ Money</u>	\$634.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.11	Internal Revenue Service Nonpriority Creditor's Name Centralized Insolvency Operations PO Box 7346 Number Street Philadelphia, PA 19101-7346 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>12/31/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured Portion of Taxes</u>	\$45,631.85
<p>Who incurred the debt? Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p>Is the claim subject to offset?</p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.12	Jefferson Capital Systems, LLC Nonpriority Creditor's Name PO Box 1999 Number Street Saint Cloud, MN 56302-9617 City State ZIP Code	Last 4 digits of account number <u>9 0 0 3</u> When was the debt incurred? <u>5/1/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for UPLIFT</u>	\$785.00
<p>Who incurred the debt? Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p>Is the claim subject to offset?</p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13 **Jefferson Capital Systems, LLC** Last 4 digits of account number 8 5 5 1 **\$570.02**

Nonpriority Creditor's Name

PO Box 1999

Number

Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Saint Cloud, MN 56302-9617

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collecting For -Premier Bankcard, LLC**

Is the claim subject to offset?

☒ No

☐ Yes

4.14 **LabCorp** Last 4 digits of account number **\$1,745.97**

Nonpriority Creditor's Name

Attn: Bankruptcy

P.O. Box 2240

Number

Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Burlington, NC 27216-2240

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Medical Bill**

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.15 **LVNV FUNDING LLC** Last 4 digits of account number 4 8 5 2 **\$117.05**

Nonpriority Creditor's Name

PO Box 10587

Number

Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Greenville, SC 29603

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Collecting For -MCI Communications Services, Inc

Is the claim subject to offset?

☒ No

☐ Yes

4.16 **Resurgent Capital Services** Last 4 digits of account number **\$911.43**

Nonpriority Creditor's Name

PO Box 1927

Number

Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Greenville, SC 29602

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Collecting For -Mountainview Hospital

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.17 **T-Mobile** Last 4 digits of account number **\$1,800.00**

Nonpriority Creditor's Name

When was the debt incurred?

T-Mobile Bankruptcy Team

PO Box 53410

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Bellevue, WA 98015-3410

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only

☐ Student loans

☐ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify **Collection**

Is the claim subject to offset?

☒ No

☐ Yes

4.18 **Ulta** Last 4 digits of account number **\$400.00**

Nonpriority Creditor's Name

When was the debt incurred?

P.O Box 650964

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Dallas, TX 75265

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only

☐ Student loans

☐ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify **Credit Card**

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1

Brandi

Michelle

Price

Case number (if known) **24-31642-13**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.19 **Uplift, Inc.** Last 4 digits of account number **6 2 1 8** **\$786.00**

Nonpriority Creditor's Name

440 N. Wolfe Road

Number Street

Sunnyvale, CA 94085

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? **5/1/2022**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.20 **Wells Fargo Bank NA** Last 4 digits of account number **5 9 2 0** **\$144.00**

Nonpriority Creditor's Name

1 Home Campus MAC X2303-01A 3rd Floor

Number Street

Des Moines, IA 50328

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? **2/1/2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **CreditCard**

Debtor 1

Brandi **Michelle** **Price**
First Name Middle Name Last Name

Case number (if known) **24-31642-13**

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <u>\$0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b. <u>\$45,000.00</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$3,250.00</u>
	6e.	Total. Add lines 6a through 6d.	6e. <u>\$48,250.00</u>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <u>\$0.00</u>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$70,855.03</u>
	6j.	Total. Add lines 6f through 6i.	6j. <u>\$70,855.03</u>

Fill in this information to identify your case:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-31642-13</u>		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Benco Mini Storage</u> Name <u>925 N Nolan River Rd</u> Number Street <u>Cleburne, TX 76033</u> City State ZIP Code	Storage Lease-Unit 00347 Contract to be ASSUMED
2.2	<u>Verizon</u> Name <u>Po Box 7000</u> Number Street <u>Silver Spring, MD 20914</u> City State ZIP Code	Cell Phone Service Contract Contract to be ASSUMED
2.3	<u></u> Name <u></u> Number Street <u></u> City State ZIP Code	
2.4	<u></u> Name <u></u> Number Street <u></u> City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	Brandi	Michelle	Price
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern		District of Texas
Case number (if known)	24-31642-13		

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- ☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

- ☐ No
☐ Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

 Name of your spouse, former spouse, or legal equivalent

 Number Street

 City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

 Name

 Number Street

 City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3.2

 Name

 Number Street

 City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-31642-13</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

Debtor 2 or non-filing spouse

☐ Employed ☒ Not Employed

☐ Employed ☐ Not Employed

City State Zip Code

City State Zip Code

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

2. \$0.00 \$0.00

3. **Estimate and list monthly overtime pay.**

3. + \$0.00 + \$0.00

4. **Calculate gross income.** Add line 2 + line 3.

4. \$0.00 \$0.00

Debtor 1 **Brandi Michelle Price** Case number (if known) **24-31642-13**
 First Name Middle Name Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$0.00	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$0.00	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$4,050.00	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$3,440.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$7,490.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$7,490.00	\$0.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.	\$7,490.00	\$7,490.00
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Debtor 1	Brandi	Michelle	Price	Case number (if known) 24-31642-13
	First Name	Middle Name	Last Name	

8a. Attached Statement

Southern Sourcing -- Business Income

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u>\$4,800.00</u>
--------------------------	--------------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense	<u>\$100.00</u>
3. Net Employee Payroll (Other than debtor)	<u>\$0.00</u>
4. Payroll Taxes	<u>\$0.00</u>
5. Unemployment Taxes	<u>\$0.00</u>
6. Worker's Compensation	<u>\$0.00</u>
7. Other Taxes	<u>\$0.00</u>
8. Inventory Purchases (Including raw materials)	<u>\$0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u>\$0.00</u>
10. Rent (Other than debtor's principal residence)	<u>\$0.00</u>
11. Utilities	<u>\$400.00</u>
12. Office Expenses and Supplies	<u>\$0.00</u>
13. Repairs and Maintenance	<u>\$0.00</u>
14. Vehicle Expenses	<u>\$0.00</u>
15. Travel and Entertainment	<u>\$0.00</u>
16. Equipment Rental and Leases	<u>\$0.00</u>
17. Legal/Accounting/Other Professional Fees	<u>\$0.00</u>
18. Insurance	<u>\$250.00</u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u>\$0.00</u>
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts	
TOTAL PAYMENTS TO SECURED CREDITORS	<u>\$0.00</u>
21. Other Expenses	
TOTAL OTHER EXPENSES	<u>\$0.00</u>
22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)	<u>\$750.00</u>

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)	<u>\$4,050.00</u>
--	--------------------------

Fill in this information to identify your case:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-31642-13</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$0.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$0.00

4b. \$0.00

4c. \$0.00

4d. \$0.00

Debtor 1

Brandi	Michelle	Price
First Name	Middle Name	Last Name

Case number (if known) **24-31642-13**

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$450.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$85.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$115.00</u>
6d.	Other. Specify: _____	6d. <u>\$0.00</u>
7.	Food and housekeeping supplies	7. <u>\$450.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$50.00</u>
10.	Personal care products and services	10. <u>\$50.00</u>
11.	Medical and dental expenses	11. <u>\$150.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$250.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$50.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$260.00</u>
15c.	Vehicle insurance	15c. <u>\$290.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. <u>\$0.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: <u>Storage Unit</u>	17c. <u>\$115.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1	Brandi	Michelle	Price	Case number (if known) 24-31642-13
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	

21. Other. Specify: <u>Pet expenses</u>	21. + <u>\$25.00</u>
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. <u>\$2,340.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. <u>\$0.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$2,340.00</u>
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from <i>Schedule I</i> .	23a. <u>\$7,490.00</u>
23b. Copy your monthly expenses from line 22c above.	23b. <u>– \$2,340.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. <u>\$5,150.00</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes.	None

Fill in this information to identify your case:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-31642-13</u>		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$486,758.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$36,277.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$523,035.00</u>

Your assets

Value of what you own

Part 2: Summarize Your Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D*..... \$374,471.29

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*..... \$48,250.00

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*..... + \$70,855.03

Your total liabilities

\$493,576.32

Your liabilities

Amount you owe

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of *Schedule I*..... \$7,490.00

5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of *Schedule J*..... \$2,340.00

Debtor 1	Brandi	Michelle	Price	Case number (if known) 24-31642-13
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$4,050.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$45,000.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	<div style="border: 1px solid black; padding: 5px; display: inline-block;"><u>\$45,000.00</u></div>

Fill in this information to identify your case:

Debtor 1	<u>Brandi</u>	<u>Michelle</u>	<u>Price</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-31642-13</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Brandi Michelle Price
Brandi Michelle Price, Debtor 1

Date 06/17/2024
MM/ DD/ YYYY

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Brandi Michelle Price**

CASE NO **24-31642-13**

CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$476,758.00	\$344,828.69	\$131,929.31	\$131,929.31	\$0.00
3.	Motor vehicle	\$21,250.00	\$12,646.82	\$8,603.18	\$4,250.00	\$4,353.18
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$2,325.00	\$0.00	\$2,325.00	\$2,325.00	\$0.00
7.	Electronics	\$700.00	\$0.00	\$700.00	\$700.00	\$0.00
8.	Collectibles of value	\$5.00	\$0.00	\$5.00	\$5.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
12.	Jewelry	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
13.	Nonfarm animals	\$10.00	\$0.00	\$10.00	\$10.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Brandi Michelle Price**

CASE NO **24-31642-13**

CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$502,248.00	\$357,475.51	\$144,772.49	\$140,419.31	\$4,353.18

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Brandi Michelle Price**

CASE NO **24-31642-13**

CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<u>Real Property</u>			
Hilton Grand Vacations Timeshare 3575 Las Vegas Blvd S Las Vegas, NV 89109	\$10,000.00		\$10,000.00
<u>Personal Property</u>			
2016 Chevrolet Camaro	\$11,275.00		\$11,275.00
TOTALS:	\$21,275.00	\$0.00	\$21,275.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<u>Real Property</u>				
(None)				
<u>Personal Property</u>				
2008 BMW 328XI VIN: xx8418	\$2,725.00	\$2,616.74	\$108.26	\$108.26
2016 Ford F150 VIN: xx5371	\$14,275.00	\$10,030.08	\$4,244.92	\$4,244.92
TOTALS:	\$502,248.00	\$357,475.51	\$144,772.49	\$4,353.18

Summary	
A. Gross Property Value (not including surrendered property)	\$502,248.00
B. Gross Property Value of Surrendered Property	\$21,275.00
C. Total Gross Property Value (A+B)	\$523,523.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$357,475.51
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$357,475.51
G. Total Equity (not including surrendered property) / (A-D)	\$144,772.49
H. Total Equity in surrendered items (B-E)	\$21,275.00
I. Total Equity (C-F)	\$166,047.49

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

IN RE: **Brandi Michelle Price**

CASE NO **24-31642-13**

CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

Summary	
J. Total Exemptions Claimed	\$140,419.31
K. Total Non-Exempt Property Remaining (G-J)	\$4,353.18

